

**ALL PROJECTS SUBMIT THIS FORM AT YEAR'S END
DUE TO OPI BY NOVEMBER 10, 2005**



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**ADVANCED PLACEMENT INCENTIVE GRANT
END-of-YEAR PROGRAM REPORT
2004 – 2005**

District Name:

Project Number:

Co. # _____ Legal Entity # _____ 40 05
OPI # Year

Evaluation Submitted by:

E-mail Address:

Telephone Number:

I. STAFF TRAINING

Number of Staff Trained	Position of Each Staff	Title, Type, and Length of Training	Training Location

II. NUMBER OF STUDENTS ENROLLED IN ONLINE AP AND PRE-AP COURSES

Name of Course	No. Fall Sem.	No. Spring Sem.	No. Summer	No. Completed	No. Withdrew

III. OTHER ACTIVITIES

Describe any other expenditures or activities funded by this grant:

IV. RESULTS

Briefly describe how the 2004-2005 AP grant *expanded* or *enhanced* AP in your district:

Signature of Authorized Representative

Date